CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION A PUBLIC DOCUMENT

STATEMENT OF ECONOMIC INTERESTS COVER PAGE



MAR - 1 2011

Please type or print in ink.) BY:	<u> </u>
NAME OF FILER (LAST)	(FIRST)	(MIDDLE)
Mitchell	Holly	Jewell
1. Office, Agency, or Court		
Agency Name		
State Assembly - 47th A.D.		
Division, Board, Department, District, if applicable	Your Position	
	Assemblywoman	
▶ If filing for multiple positions, list below or on an attachment.		
Agency:	Position:	
2. Jurisdiction of Office (Check at least one box)		· · · · · · · · · · · · · · · · · · ·
State ■ Control of the	☐ Judge (Statewide Jurisdiction)	
Multi-County	County of	
City of		
3. Type of Statement (Check at least one box)		
Annual: The period covered is January 1, 2010, through C 2010.	December 31, Leaving Office: Date Left//	_
The period covered is	ecember 31, O The period covered is January 1, 2010, thr leaving office.	ough the date of
Assuming Office: Date/	O The period covered is	_, through the date
Candidate: Election Year Office s	ought, if different than Part 1:	1 8 3 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5
4. Schedule Summary		_ =
Check applicable schedules or "None."	➤ Total number of pages including this cover page:	
Schedule A-1 - Investments - schedule attached	Schedule C - Income, Loans, & Business Positions	- schedule attached
Schedule A-2 - Investments – schedule attached	Schedule D - Income - Gifts - schedule attached	V/
Schedule B • Real Property – schedule attached	Schedule E ■ Income — Gifts — Travel Payments — se	chedule attached
-o None - No repo	r- rtable interests on any schedule	
l certify under penalty of perjury under the laws of the State	of California that	
Date Signed 3/1/2011		
Date Signed (month, day, year)	Signature	

SCHEDULE B Interests in Real Property (Including Rental Income)

CALIFORNIA FORM 7 FAIR POLITICAL PRACTICES COMMISSION Name Holly J. Mitchell

STREET ADDRESS OR PRECISE LOCATION	► STREET ADDRESS OR PRECISE LOCATION
1310-1312 Keniston Ave.	. []
CITY	CITY
Los Angeles, CA 90019	
FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$2,000 - \$10,000 10,001 - \$100,000 100,001 - \$1,000,000 ACQUIRED DISPOSED Over \$1,000,000	FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$2,000 - \$10,000 / / 10 / / 10 100,001 - \$1,000,000 ACQUIRED DISPOSED Over \$1,000,000
NATURE OF INTEREST	NATURE OF INTEREST
Ownership/Deed of Trust	Ownership/Deed of Trust Easement
Leasehold Trs. remaining Other	
IF RENTAL PROPERTY, GROSS INCOME RECEIVED	IF RENTAL PROPERTY, GROSS INCOME RECEIVED
☐ \$0 - \$499 ☐ \$500 - \$1,000 ☐ \$1,001 - \$10,000	☐ \$0 - \$499 ☐ \$500 - \$1,000 ☐ \$1,001 - \$10,000
\$10,001 - \$100,000	S10,001 - \$100,000 OVER \$100,000
SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more.	SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more.
Sylvia J. Johnson	
	cial lending institutions made in the lender's regular course public without regard to your official status. Personal loans to of business must be disclosed as follows:
NAME OF LENDER*	NAME OF LENDER*
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
BUSINESS ACTIVITY, IF ANY, OF LENDER	BUSINESS ACTIVITY, IF ANY, OF LENDER
INTEREST RATE TERM (Months/Years)	- INTEREST RATE TERM (Months/Years)
%	%
HIGHEST BALANCE DURING REPORTING PERIOD	HIGHEST BALANCE DURING REPORTING PERIOD
\$500 - \$1,000 \$1,001 - \$10,000	\$500 - \$1,000 \$1,001 - \$10,000
S10,001 - \$100,000 OVER \$100,000	S10,001 - \$100,000 OVER \$100,000
Guarantor, if applicable	Guarantor, if applicable
	-

SCHEDULE C Income, Loans, & Business Positions

(Other than Gifts and Travel Payments)

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION
Name
Holly J. Mitchell

▶ 1. INCOME RECEIVED	► 1. INCOME RECEIVED		
NAME OF SOURCE OF INCOME	NAME OF SOURCE OF INCOME		
U of CA - CA Breast Cancer Research Program	Crystal Stairs, Inc.		
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)		
10920 Wilshire Bl. 5th Fl. L.A., CA 90024	5150 W. Goldleaf Cir, 3rd Fl., L.A., CA 90056		
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE		
Bi-Annual Research Symposium	Child Development Agency		
YOUR BUSINESS POSITION	YOUR BUSINESS POSITION		
Consultant	Chief Executive Officer		
GROSS INCOME RECEIVED	GROSS INCOME RECEIVED		
	\$500 - \$1,000 \$1,001 - \$10,000		
S10,001 - \$100,000 OVER \$100,000	S10,001 - \$100,000 NOVER \$100,000		
CONSIDERATION FOR WHICH INCOME WAS RECEIVED	CONSIDERATION FOR WHICH INCOME WAS RECEIVED		
	Salary Spouse's or registered domestic partner's income		
Loan repayment Partnership	Loan repayment Partnership		
Sale of	☐ Sale of		
(Property, car, boat, etc.)	(Property, car, boat, etc.)		
Commission or Rental Income, list each source of \$10,000 or more	Commission or Rental Income, list each source of \$10,000 or more		
C) Coher	□ Oh		
Other(Describe)	Other(Describe)		
1	I		
▶ 2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING PERI	OD		
* You are not required to report loans from commercial	lending institutions, or any indebtedness created as part		
of a retail installment or credit card transaction, made			
	rour official status. Personal loans and loans received		
not in a lender's regular course of business must be o	disclosed as follows.		
NAME OF LENDER*	INTEREST RATE TERM (Months/Years)		
	%		
ADDRESS (Business Address Acceptable)	SECURITY FOR LOAN		
DUODECO ACTIVITY IS ANY OF LENDER	SECONT FOR ECAN		
	☐ None ☐ Personal residence		
BUSINESS ACTIVITY, IF ANY, OF LENDER	☐ None ☐ Personal residence		
*****	None ☐ Personal residence ☐ Real Property Street address		
HIGHEST BALANCE DURING REPORTING PERIOD	Real Property		
HIGHEST BALANCE DURING REPORTING PERIOD \$500 - \$1,000	Real Property		
HIGHEST BALANCE DURING REPORTING PERIOD \$500 - \$1,000 \$1,001 - \$10,000	Real PropertyStreet address		
HIGHEST BALANCE DURING REPORTING PERIOD \$500 - \$1,000 \$1,001 - \$10,000 \$10,001 - \$100,000	Real PropertyStreet address		
HIGHEST BALANCE DURING REPORTING PERIOD \$500 - \$1,000 \$1,001 - \$10,000	Real PropertyStreet address		
HIGHEST BALANCE DURING REPORTING PERIOD \$500 - \$1,000 \$1,001 - \$10,000 \$10,001 - \$100,000	Real Property Street address City Other		
HIGHEST BALANCE DURING REPORTING PERIOD \$500 - \$1,000 \$1,001 - \$10,000 \$10,001 - \$100,000	Real Property Street address City Other		

SCHEDULE D Income – Gifts

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION

Name

Holly J. Mitchell

► NAME OF SOURCE		► NAME OF SOURCE		
John A. Perez for Assembly		Chukchansi E	conomic Deve	lopment Authority
ADDRESS (Business Address Acceptable))	ADDRESS (Busines	s Address Acceptab	le)
777 South Figueroa St., 4050,	, L.A. CA 90017	46575 Road 4	17, Bldg. C, C	oarsegold, CA 93614
BUSINESS ACTIVITY, IF ANY, OF SOURCE	CE	BUSINESS ACTIVIT	Y, IF ANY, OF SOU	RCE
Campaign Committee		Native Americ	an Tribe	
DATE (mm/dd/yy) VALUE	DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
12,10,10 \$ 110.00	Leather portfolio	7,9,10	\$39.08	Dinners
\$		7 , 9 , 10	\$90.00	Concert tickets
		/	\$	
► NAME OF SOURCE		► NAME OF SOURCE		
Quintus Financial & Insurance	Services	Santa Ynez B	and of Chumas	sh Indians
ADDRESS (Business Address Acceptable)		ADDRESS (Busines	s Address Acceptabl	(e)
201 South Lake Ave. Ste. 801	, Pasadena, CA 91101_	100 Via Juana	Lane, Santa \	/nez, CA 93460
BUSINESS ACTIVITY, IF ANY, OF SOURCE	DE	BUSINESS ACTIVIT	Y, IF ANY, OF SOU	RCE
Finance and Insurance		Native Americ	an Tribe	
DATE (mm/dd/yy) VALUE	DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
12,10,10 s 140.00	Waterman pen	8 , 5 , 10	<u>\$100.00</u>	Concert tickets
			\$	
			\$	
► NAME OF SOURCE		► NAME OF SOURCE		
Citizen Hotel				
ADDRESS (Business Address Acceptable)		ADDRESS (Busines	s Address Acceptabl	e)
926 J Street, Sacramento, CA	95814			
BUSINESS ACTIVITY, IF ANY, OF SOURCE	CE	BUSINESS ACTIVIT	Y, IF ANY, OF SOUR	RCE
Hotel				
	DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
	Gift certificate		\$	
			\$	
			\$	
Comments:				

SCHEDULE E Income – Gifts Travel Payments, Advances, and Reimbursements

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION
Name
Holly J. Mitchell

- Reminder you must mark the gift or income box.
- You are not required to report income from government agencies.
- You may mark the box 501(c)(3) for a travel payment received from a nonprofit 501(c)(3) organization. When the payment is a gift it is reportable but is not subject to the \$420 gift limit.

► NAME OF SOURCE	► NAME OF SOURCE
The Jewish Federation of Greater Los Angeles	
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
6505 Wilshire Bl.	
CITY AND STATE	CITY AND STATE
Los Angeles, CA 90048	·
BUSINESS ACTIVITY, IF ANY, OF SOURCE S01 (c)(3)	BUSINESS ACTIVITY, IF ANY, OF SOURCE 501 (c)(3)
DATE(S): 12 , 12 , 10 - 12 , 20 , 10 AMT: \$ 4567.00	DATE(\$):/
TYPE OF PAYMENT: (must check one) 🗵 Gift 🗌 Income	TYPE OF PAYMENT: (must check one) ☐ Gift ☐ Income
DESCRIPTION: Study tour of Israel	DESCRIPTION:
NAME OF SOURCE	► NAME OF SOURCE
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
CITY AND STATE	CITY AND STATE
BUSINESS ACTIVITY, IF ANY, OF SOURCE 501 (c)(3)	BUSINESS ACTIVITY, IF ANY, OF SOURCE 501 (c)(3)
DATE(S):	DATE(S):
TYPE OF PAYMENT: (must check one) Gift Income	TYPE OF PAYMENT: (must check one)
DESCRIPTION:	DESCRIPTION:
Comments:	